

# OFFICIAL BID FORM

IFB #: \_\_\_\_\_

Date: \_\_\_\_\_

Virginia Contractor Number: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Authorized Contact (print): \_\_\_\_\_

Authorized Contact (signature): \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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Do you plan on subcontracting any of the required work? **Y** or **N**

If yes, please list all subcontractors below: *(Use additional sheets if necessary)*

Virginia Contractor Number: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Authorized Contact (print): \_\_\_\_\_

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Virginia Contractor Number: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Authorized Contact (print): \_\_\_\_\_

Anticipated Starting Date For This Project: \_\_\_\_\_

Estimated Completion Date: \_\_\_\_\_

Number Of Consecutive Days Estimated To Complete This Project: \_\_\_\_\_

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Please Acknowledge Receipt Of Each Addendum (If Any) By Writing The Date Of Each Below:

\_\_\_\_\_

\_\_\_\_\_

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**BID PRICE**

Base Bid:

Total Cost of Exterior Painting of Treasurer/Commissioner Building (329 Court Street) as described in IFB Scope of Work: \$ \_\_\_\_\_

Replacement of Rotted Wood:

Cost Per Linear Foot: \$ \_\_\_\_\_

## REFERENCES

Each bidder must provide the name, address, telephone number and contact person for at least three (3) other firms or government agencies for whom this type of work has been performed in the past twelve (12) months. ***Bid packages returned without this completed form will be considered as being incomplete and the bidder will be disqualified.***

### **Reference #1**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_

### **Reference #2**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_

### **Reference #3**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_